

ADHERENCE TO THERAPEUTIC FOOTWEAR IN DIABETIC PATIENTS WITH PREVIOUS DIABETIC FOOT ULCER

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INTRODUCTION

Diabetic foot ulcer (DFU) is a major complication of diabetes mellitus, associated with high morbidity and risk of amputation. Therapeutic footwear is a key preventive strategy for ulcer recurrence in patients with a history of DFU.

AIMS

- Analyze the adherence to therapeutic footwear in diabetic patients with a previous DFU;
- The impact of therapeutic adherence in reducing the risk of ulcer recurrence was evaluated.

METHODS

- Monocentric retrospective study;
- Patients monitored every 1-3 months at dedicated diabetic foot clinic;
- Adherence based on Likert-scale questionnaire [1];
- Ulcer recurrence and amputation recorded at 1-year.

RESULTS

Baseline Characteristics	Value
N, Patients	106
Age, mean $\pm$ SD	71.5 $\pm$ 9.6 years
Male, N (%)	68 (64.5%)
Type 2 Diabetes, N (%)	97 (91.5%)
Peripheral Neuropathy, N (%)	87 (82.1%)
Peripheral Artery Disease, N (%)	45 (42.4%)

Adherence Level	Patients N(%)	Ulcer Recurrence n/N (%)	Amputation n/N (%)
Whole Population	106 (100%)	15/106 (14.1%)	0/106 (0%)
Optimal	58 (54.7%)	3/58 (5.2%)	0/58 (0%)
Good	35 (33.0%)	4/35 (11.4%)	0/35 (0%)
Partial	6 (5.7%)	4/6 (66.7%)	0/6 (0%)
Poor	7 (6.6%)	4/7 (57.1%)	0/7 (0%)

χ^2 -ANOVA: $p=0.0001$ difference between Optimal Vs Partial/Poor and Good Vs Partial/Poor

Adeherence



CONCLUSIONS

Excellent-to-good adherence was achieved in nearly 90%, suggesting that regular clinical follow-up in a dedicated diabetic foot clinic, is effective in promoting therapeutic footwear use in high-risk diabetic patients.

Partial-to-poor adherence is strongly and significantly associated with increased ulcer recurrence risk. Reinforcing adherence through multidisciplinary follow-up every 1-3 months could further reduce DFU recurrence rates and associated complications.

REFERENCES

[1] Norman G. Likert scales, levels of measurement and the "laws" of statistics. Adv Health Sci Educ. 2010;15(5):625-632. doi:10.1007/s10459-010-9222-y